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LETTER OF INSTRUCTIONS

TO WHOM IT MAY CONCERN:

I am writing this letter to declare that I have entered into a committed, long term relationship with PARTNER, and as such, PARTNER occupies a position of great trust and responsibility in my life. PARTNER and I share common values and confidence. We have discussed the contents of this letter, which is an expression of my common law right of personal autonomy, before I have signed it.

The purpose of this letter is not to effect or establish any property rights or any other financial matters. Its purpose is to confer my authority on PARTNER, similar to a spouse or parent, as the holder of my confidence, to announce my decisions with respect to personal matters including, but not limited to the following: medical questions, institutional visitation, funeral and burial concerns, and custody and visitation of pets. I believe that PARTNER is knowledgeable concerning the ownership of personal property within our mutual custody. Without intending to limit the foregoing, it is my wish to confer all authority to PARTNER to speak on my behalf with respect to these subjects and to have the decision of PARTNER prevail, notwithstanding the contrary preference of any member of my biological family.

I request but do not require that PARTNER will consult with other family members who have been supportive of our relationship.

PARTNER is familiar with my wishes, attitudes and beliefs. Because of this knowledge and confidence I have in PARTNER, with respect to any health care decisions not already embraced within any power of attorney and any advance directive for health care that I may have given, I direct my health care providers to consult with PARTNER and recognize that PARTNER is capable of expressing my thoughts if I cannot. PARTNER is more conversant

with my preferences, and the announcement of my decision in a health matter by PARTNER shall be given more weight and authority than any wishes of a member of my biological family.

If I am in a hospital, including ICU or CCU, a hospice, skilled nursing facility, or other medical or residential care facility, for purposes of visitation, PARTNER is to be treated as my primary family member, and shall be given access to me in all circumstances. PARTNER shall have the authority to exclude other persons from my presence, including members of my biological family, if, in the discretion of PARTNER, this is appropriate. PARTNER shall be treated as my personal representative as defined in HIPAA regulations, 45 CFR §164.502.

PARTNER and I have discussed our choice of the treatment of our mortal remains, methods of interment and any ceremonies to commemorate our passing. While our family, culture or religion may have different practices, our decisions were made understanding any conflict, and should be given effect. If we have chosen a joint headstone, I expect that this will be carried out. It is my explicit and sincere expression that PARTNER, and not anyone else shall make arrangements for the final disposition of my remains, 20 Pa C.S.A. §305.

We both love our pets, and I am confident that PARTNER will carry out appropriate arrangements for them.

In all things, I implore my family and friends to support PARTNER in every respect. We have chosen to entwine our lives, and in any time of tension and sadness, PARTNER will need everyone's help.

I hereby set my hand to this Letter of Instructions prepared on the letterhead of my attorney on the ____ day of _____, 2011, at _____, Pennsylvania.

CLIENT

In our presence CLIENT, of LOCATION, Pennsylvania, the above-named individual signed this and declared it to be an expression of her instructions. and now at her request, in her presence, and in the presence of each other, we sign as witnesses:

ADDRESS

ADDRESS

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF CENTRE

We, CLIENT and witnesses, respectively, whose names are signed to the attached or foregoing instrument, being first duly sworn, do hereby declare to the undersigned authority that CLIENT signed and executed the instrument as her Letter of Instructions, and that she had signed willingly, and that she executed it as her free and voluntary act for the purposes therein expressed, and that each of the witnesses, in her presence and hearing, signed it as witness and that to the best of their knowledge, CLIENT was at the time eighteen years of age or older, of sound mind and under no constraint or undue influence.
